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Assistant Secretary of Defense for Health Affairs (ASD/HA) Signs "Treatment of Traumatic Eye Injuries" Memorandum

Due in large part to the efforts of individuals and organizations across the Defense Department (DoD), including the Joint Trauma System (JTS), the Defense Health Agency Medical Logistics Division (DHA MEDLOG), the Committee on Tactical Combat Casualty Care (CoTC3), DHA Force Health Protection and Readiness (FHP&R), and VCE, on July 7, 2014 the ASD/HA signed a DoD-wide [memorandum](#) for the "Treatment of Traumatic Eye Injuries." This memo outlines that the Services and Joint Staff must review and update their doctrine and training to reflect: (1) the current guidance from the JTS Clinical Practice Guideline (CPG) titled the "Initial Care of Ocular and Adnexal Injuriesⁱ"; (2) Tactical Combat Casualty Care (TC3) Guidelinesⁱⁱ; and (3) VCE recommendations, all of which stress the use of a rigid eye shield at the point of injury and immediate evacuation to ophthalmology as the proper first response in the management of ocular trauma. This memo, along with the JTS CPG and TC3 Guidelines, is now being disseminated to the Service policy points of contact for distribution to the Force, to include the Joint Staff. Illustrating the need for this measure, a prior JTS study revealed that only approximately 40 percent of eye injuries were treated with rigid eye shields at the time of injury.ⁱⁱⁱ Additionally, an in-depth evaluation of root causes revealed the widespread continued fielding and use of antiquated military "Eye Trauma" first aid kits that promoted the incorrect treatment of ocular injuries, eye patching. These kits, dating from the early 1960s, are commonly found as components of larger military and civilian first aid kits, such as those found in vehicles and boats.

DHA MEDLOG has been working to remove and destroy the obsolete eye trauma first aid kits from all military first aid kits (FAKs). Of note, on July 22, 2014, a formal DoD Medical Materiel Quality Control Message (MMQC-14-1652)^{iv} was issued to the Services to destroy these outdated supplies and replace them with the rigid eye shields in FAKs.

Separately but additionally, the versatile cravat, or triangular bandage—which is also commonly found in these and other first aid kits—should NEVER be placed over the eye in the event of ocular trauma, despite enclosed instructions to do so, unless the eye is first properly protected with a rigid shield.

These important strides taken by the DoD can be used to influence proper eye trauma training and management in the military as well as the broader civilian community, including emergency medicine and community-based first aid courses (e.g., schools, scouting, civic organizations). VCE will continue to work alongside both military and civilian organizations to ensure that only evidence-based management and equipment is used in the event of ocular trauma. These efforts will improve and standardize care for Service members, as well as promote the implementation of best practices in care across the DoD, VA and civilian communities.

References

ⁱ Joint Theater Trauma System Clinical Practice Guideline; Initial care of ocular and adnexal injuries by non-ophthalmologists. JTS. 6 Mar 2012; available at: http://www.usaisr.amedd.army.mil/clinical_practice_guidelines.html

ⁱⁱ Tactical Combat Casualty Care Guidelines, 17 Sept 2012; available at: http://www.usaisr.amedd.army.mil/assets/pdfs/TCCC_Guidelines_140602.pdf

ⁱⁱⁱ Mazzoli, R., Gross, K., Butler, F., Bolenbaucher, R., Molter, N., McFarland, M. Use of Rigid Eye Shields (Fox Shields) at the Point of Injury in Afghanistan; available at: <https://www.jsomonline.org/TCCC/RM%20130807%20fox%20shields%20in%20afg%20poster.pdf>

^{iv} DoD Medical Materiel Quality Control Messages (MMQC)/Medical Materiel Information Messages (MMI) & Images, 22 July, 2014; available at: http://www.usamma.amedd.army.mil/assets/apps/nala_qaweb/message.cfm?MSG=MMQC-14-1652

